



INDOOR SOCCER LEAGUE ENTRY FORM

Team Name:

Division: *Men* *Co-Rec*

Captain's Name:

Alternate Captain:

URI Student ID # :

URI Student ID # :

Address:

Address:

City/State/Zip

City/State/Zip

Phone:

Phone:

Email:

Email:

Registration is a 3-step process and includes (1) payment of team registration fees, (2) creation of the team on URI's IMLeagues website, and (3) attendance at the mandatory captains meeting. **DO NOT WAIT UNTIL THE LAST MINUTE TO REGISTER YOUR TEAM.** All teams must pay the league entry fee and forfeit deposit totaling \$50 when handing in this registration form at the IM Sports Office in Keaney. Team captains must also create and register the team on URI's IMLeagues website (www.imleagues.com/schools/uri). Additionally, the minimum number of players must also register on IMLeagues and join the newly created team in order to round out the team roster. Steps 1 and 2 must be completed *during the registration period (Oct 17-21)*. Upon successful completion of Steps 1 & 2, team captains can then select a specific time slot for the team, where applicable. Time slots are available on a first come, first served basis. Finally, each team must have a representative (preferably the team captain) at the mandatory captains meeting for each desired sport. Teams that are not present for the entire captains meeting will lose all scheduling priority and previously selected time slots and may be excluded from the league altogether.



PLEASE READ AND SIGN - As the captain of my team, I agree to operate my team within the guidelines established by the Intramural Sports Program. I have checked the eligibility of all of my team's players and assume full responsibility in the event of any discrepancies. I am also responsible for paying any forfeit fees incurred by my team during the season and understand that failure to comply with these rules will result in disciplinary action as outlined in the Intramural Sports Handbook.

CAPTAIN'S SIGNATURE _____ **DATE** _____

For office use only

Collected by _____

Date _____

Amount paid \$ _____

Office Staff

Initials _____

Date _____

Forfeit: _____ or

Refund: _____

Captains Signature

